

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

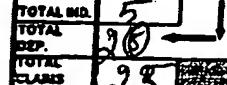
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
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TOTAL BID.



TOTAL DEP.

TOTAL CLAIMS



TOTAL BID.

TOTAL DEP.

TOTAL CLAIMS